## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000038722

Entity Name: O&R TRANS INC

City-St-Zip:

CORAL SPRINGS, FL 33071

FILED Apr 11, 2009 Secretary of State

Littly Nai	me. Oak n	KANS II	VC					
Current Principal Place of Business:				New Pri	New Principal Place of Business:			
10354 HAF BLDG 4	RBOR INN CI	Γ						
	PRINGS, FL	33071	US					
Current M	lailing Addre	ss:		New Ma	iling Addre	ss:		
BLDG 4	RBOR INN CT							
CORAL SE	PRINGS, FL (	33071	US					
FEI Number:	: 06-1687673	FEIN	umber Applied For ( )	FEI Number Not A	oplicable ( )	Certificate of Status Desired (X)		
Name and Address of Current Registered Agent:				Name a	Name and Address of New Registered Agent:			
RODRIGUEZ, ODALYS 834 HARBOR INN DR				10354 H	RODRIGUEZ, ODALYS 10354 HARBOR INN CT			
CORAL SPRINGS, FL 33071 US				CORAL	CORAL SPRINGS, FL 33071 US			
The above in the State	named entity e of Florida.	submits	s this statement for the p	ourpose of changin	g its register	ed office or registered agent, or bo	oth,	
SIGNATURE:					04/11/2009			
	Electro	nic Sigr	ature of Registered Ag	ent		Date	_	
Election Car	npaign Financir	ng Trust I	Fund Contribution ( ).					
OFFICERS	S AND DIREC	CTORS:		ADDITIO	ONS/CHANG	SES TO OFFICERS AND DIREC	ΓORS:	
Title: Name: Address: City-St-Zip:	P, T ( RODRIGUEZ, 10354 HARBO CORAL SPRIN	OR INN CT		Title: Name: Address: City-St-Zip	ı:	() Change () Addition		
Title: Name: Address: City-St-Zip:	P ( ROSADO, RA' 10354 WARBO CORAL SPRIN	OR INN C		Title: Name: Address: City-St-Zip	10354 HA	(X) Change ()Addition RAYMOND RBOR INN CT PRINGS, FL 33071		
Title: Name: Address:	VP ( RODRIGUEZ, 10354 HARBO			Title: Name: Address:		() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: ODALYS RODRIGUEZ P 04/11/2009